CLAIMS

<u>What is claimed is</u>:

1.   A method of scheduling an appointment, the method comprising:

a)   receiving a request to schedule an appointment;

b)   generating an indicator representative of a relative value of the requested appointment;

c)   evaluating the indicator; and

d)   prioritizing the request to schedule an appointment in accordance with the evaluation of the indicator.

2.   The method of claim 1, further comprising scheduling the appointment in accordance with the indicator.

3.   The method of claim 1, further comprising generating the relative value of the requested appointment as a function of at least one payment pattern of a third party payor ("TPP") associated with the request to schedule an appointment.

4.   The method of claim 3, wherein generating the relative value as a function of at least one payment pattern comprises generating the relative value as a function of at least one of a delay in collecting payments from the TPP, an allowable fee schedule amount, and a percentage of the allowable fee schedule amount paid.

5.   The method of claim 1, wherein generating the relative value of the requested appointment comprises calculating a difference between an estimated net present value of the requested appointment and an estimated cost to provide the requested appointment.

6.   The method of claim 5, wherein the estimated cost to provide the appointment is generated as a function of at least one of an administrative cost of a

medical services provider, an overhead cost of a medical office, a cost for medical office staff salaries, an equipment and supplies cost, and a utilities cost.

7. The method of claim 1, wherein generating an indicator comprises generating a rank indicator, the rank indicator corresponding to a recommended time period during which to schedule the appointment.

8. The method of claim 7, wherein generating the rank indicator comprises generating a color coded indicator, each color in a code corresponding to a recommended time period during which to schedule the appointment.

9. The method of claim 1, further comprising adjusting a recommended duration of the appointment to correspondingly alter the indicator generated.

10. The method of claim 1, further comprising scheduling resources for the appointment in accordance with the indicator generated.

11. The method of claim 10, further comprising assigning a quality level to each resource, and wherein scheduling resources comprises scheduling a high quality level resource for an appointment with a high net present value.

12. The method of claim 10, wherein scheduling resources comprises scheduling at least one of office equipment, a physician, a room and support staff.

13. The method of claim 1, wherein generating the indicator representative of the relative value comprises:
a) requesting a relative value calculation from a data information service;
b) calculating the relative value on an electronic device associated with the data information service; and

c)   receiving data indicative of the relative value from the data information service.

14.   The method of claim 1, wherein generating the indicator representative of the relative value comprises:

a)   requesting TPP payment pattern data from a data information service;

b)   receiving the TPP payment pattern data from the data information service; and

c)   calculating the relative value in accordance with the TPP payment pattern data.

15.   A method of authorizing services for a new patient by a medical services provider, the method comprising:

a)   receiving information associated with the new patient;

b)   generating an indicator representative of a relative value of likely medical services for the new patient; and

c)   authorizing or refusing the services in accordance with the indicator.

16.   The method of claim 15, wherein receiving information associated with the new patient comprises receiving at least one of a name of the new patient, a name of a third party payor ("TPP") with which the new patient is associated, and a TPP plan number for the new patient.

17.   The method of claim 15, further comprising generating the relative value of the requested appointment as a function of at least one payment pattern of a third party payor ("TPP") associated with the request to schedule an appointment.

18.   The method of claim 17, wherein a payment pattern comprises a delay in collecting payments from the TPP, an allowable fee schedule amount, a percentage of the allowable fee schedule amount paid, payment refusals, lost claims, and administrative overhead required to collect the payments from the TPP.

19. The method of claim 15, further comprising generating an indicator representative of a difference between the net present value of the likely medical services for the new patient and an estimated cost to provide the likely medical services.

20. The method of claim 19, wherein the estimated cost to provide the likely medical services is a function of at least one of an administrative cost of a medical services provider, an overhead cost of a medical office, a cost for medical office staff salaries, an equipment and supplies cost, and a utilities cost.

21. The method of claim 15, wherein generating an indicator comprises generating a color coded indicator, each color in a code corresponding to a desirability level of authorizing services for the new patient as a function of the relative value of likely medical services for the new patient.

22. A method of a primary medical personnel visiting a medical patient, the method comprising:
a) visiting the medical patient;
b) generating a recommended visit duration for the primary medical personnel as a function of a relative value of the visit with the medical patient;
c) evaluating the recommended visit duration; and
d) establishing an appropriate visit duration for the medical patient in accordance with the evaluation of the recommended visit duration.

23. The method of claim 22, further comprising providing the primary medical personnel with a timer indicating a time remaining for the recommended visit duration.

24. A method of predicting the insolvency of a third party payor ("TPP"), the method comprising:
a) storing data relating to at least one payment pattern of a TPP;

b)   analyzing changes in the at least one payment pattern of the TPP; and

c)   generating a solubility indicator in accordance with the analysis of the changes.

25.   The method of claim 24, further comprising generating an indicator of improved or worsened payment patterns of the TPP.

26.   The method of claim 24, wherein a payment pattern comprises a delay in collecting payments from the TPP, an allowable fee schedule amount, a percentage of the allowable fee schedule amount paid, payment refusals, lost claims, and administrative overhead required to collect the payments from the TPP.

27.   A method of a primary medical personnel providing a patient with additional medical information, the method comprising:

a)   visiting the patient during a medical appointment;

b)   evaluating a medical need of the patient;

c)   recommending reading material for the patient in accordance with the medical need; and

d)   ordering recommended reading material for the patient through the Internet during the medical appointment.

28.   The method of claim 27, further comprising:

a)   displaying a list of recommended reading material to the patient; and

b)   providing the patient with an opportunity to select recommended reading material to order from the list of recommended reading material.

29.   The method of claim 27, wherein ordering the recommended reading material through the Internet comprises ordering the recommended reading material from an Internet bookstore.

30.   The method of claim 27, further comprising establishing a patient account through which charges for recommended reading material ordered through the Internet may be billed.

31.   The method of claim 27, further comprising billing the patient for recommended reading material ordered by charging the patient through a medical services provider with which the primary medical personnel is associated.

32.   A method of a primary medical personnel prescribing medication for a patient, the method comprising:

a)   selecting a medication to prescribe for the patient; and

b)   using an Internet connection to order the prescription to be sent directly to the patient.

33.   The method of claim 32, wherein using an Internet connection to order the prescription comprises sending at least one of an email, a facsimile and a completed electronic form to the pharmacy.

34.   The method of claim 32, further comprising ordering the prescription during an appointment with the patient.

35.   A method of ordering supplies for a medical services provider, the method comprising:

a)   storing data relating to supply use and patient appointment patterns for a medical services provider;

b)   evaluating existing inventory amounts of at least one supply;

c)   evaluating existing patient appointments in which it is anticipated that the at least one supply may be used; and

d) ordering additional amounts of the at least one supply in accordance with an estimated need of the supply in accordance with existing inventory amounts, anticipated use of the supply, and previous supply use patterns.

36. The method of claim 35, further comprising routinely recording existing inventory amounts of supplies.

37. A method of billing a third party payor for medical services provided by a medical services provider, the method comprising:

a) providing a primary medical personnel with an electronic device for recording at least one superbill;

b) recording the at least one superbill on the electronic device during an appointment with a patient; and

c) automatically sending appropriate charges to the third party payor in accordance with the at least one superbill recorded on the electronic device.

38. The method of claim 37, further comprising gathering a plurality of superbills and generating a combined amount of charges to send to the third party payor prior to automatically sending the appropriate charges.

39. A medical management system comprising at least one electronic device having:

a) a display;

b) a memory; and

c) a processor operating in accordance with software configured to:

1) receive an identifier associated with a third party payor ("TPP") as input;

2) access data from which a relative value of at least one medical service for a patient associated with the TPP may be generated; and

3) generate a relative value of the at least one medical service.

40. The medical management system of claim 39, wherein the relative value is a net present value.

41. The medical management system of claim 39, wherein the software is configured to generate an indication of the relative value as a function of at least one payment pattern of the TPP.

42. The medical management system of claim 39, wherein a payment pattern of the TPP comprises a time delay in payment of fees by the TPP, an allowable fee schedule of the TPP, and a percentage of the allowable fees paid by the TPP.

43. The medical management system of claim 39, wherein the relative value is a difference between a net present value of the services provided and a cost of providing the at least one medical service.

44. The medical management system of claim 43, wherein the cost of providing the at least one medical service is a function of at least one of an administrative cost of a medical services provider, an overhead cost of a medical office, a cost for medical office staff salaries, an equipment and supplies cost, and a utilities cost.

45. The medical management system of claim 39, wherein the indication of a relative value is one of a plurality of ranked indicators.

46. The medical management system of claim 45, wherein the plurality of ranked indicators includes at least red, orange and green.

47. The medical management system of claim 39, wherein the identifier is an identifier of a patient associated with the TPP and the software is configured to generate an indication of whether it would be profitable to accept the patient as a new patient.

48.   The medical management system of claim 47, wherein the indication is generated as a function of the relative value of anticipated medical services to be provided for the patient.

49.   The medical management system of claim 39, wherein the indication is generated as a function of the expected profitability of the TPP.

50.   The medical management system of claim 39, wherein the software is configured to generate an indication of whether it would be profitable to enter into a services agreement with the TPP.

51.   The medical management system of claim 50, wherein the indication is generated as a function of at least one payment pattern of the TPP.

52.   The medical management system of claim 39, wherein the software is configured to generate an indication of when a patient's appointment should be scheduled.

53.   The medical management system of claim 52, wherein the indication is generated as a function of at least one payment pattern of the TPP with which the patient is associated.

54.   The medical management system of claim 39, wherein the software is configured to generate a recommended duration for a primary medical personnel to visit with the patient.

55.   The medical management system of claim 54, wherein the software is further configured to generate a timer indicating time remaining in the recommended duration.

56. The medical management system of claim 39, further comprising a central controller in communication with the at least one electronic device, the central controller enabling communication between a plurality of electronic devices and databases.

57. The medical management system of claim 56, wherein each of the at least one electronic device is configured as one of a local access terminal, a remote access terminal, a wireless access terminal, and a wireless interface.

58. The medical management system of claim 39, wherein the at least one electronic device is configured as one of a wireless access terminal and a wireless interface, and the at least one electronic device further comprises software configured to receive an electronic superbill and automatically send related charges to a TPP for payment.

59. The medical management system of claim 39, wherein the at least one electronic device is configured as one of a wireless access terminal and a wireless interface, and the at least one electronic device further comprises software configured to transmit to a pharmacy a prescription, billing information and an address to which the prescription should be delivered.

60. The medical management system of claim 39, the at least one electronic device further comprising software configured to evaluate a use pattern of at least one supply of a medical services provider, evaluate an inventory quantity of the at least one supply, evaluate an estimated scheduled appointment use of the at least one supply, and automatically order an appropriate quantity of the at least one supply.

61. The medical management system of claim 39, the at least one electronic device further comprising a biometric identifying device operatively coupled thereto.

62.   A wireless electronic device comprising software configured to receive an electronic superbill from a primary medical personnel on an electronic data entry form during a visit with a patient and automatically submit the electronic superbill to an associated accounting system for billing to a TPP.

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63.   The wireless electronic device of claim 62, wherein the software is further configured to electronically submit the electronic superbill to evaluation software configured to generate appropriate charges for the visit with the patient.

10   64.   An electronic device comprising software configured to evaluate a use pattern of at least one supply of a medical services provider, evaluate an inventory quantity of the at least one supply, evaluate an estimated scheduled appointment use of the at least one supply, and automatically order an appropriate quantity of the at least one supply.